



# Epping Parks & Recreation Department

## 2026 Summer Camp Registration Form

River Otters and Bobcats Summer Camps

See Summer Camp Brochure for This Year's Camp Trips & Events!

**Please Fill Out Separate Form For Each Child Registered:**      **Circle Shirt Size:** Kids Sizes: YXS YS YM YL **Adult Sizes:** S M L XL XXL

Participant Name: \_\_\_\_\_ Grade Next Year: \_\_\_\_\_ Gender: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Parent / Guardian 1: \_\_\_\_\_ Cell / Work Phone: \_\_\_\_\_

Parent / Guardian 2: \_\_\_\_\_ Cell / Work Phone: \_\_\_\_\_

Address Where Child Resides: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Billing Name /Address, if Different: \_\_\_\_\_

Participant Height (Needed for Some Trips): \_\_\_\_\_ E-mail Address(For Updates): \_\_\_\_\_

Will Child Be Attending Summer School or Summer Reading Program?  Yes  No  Maybe

(Please also inform the school if they will be attending Summer Rec. and schedule them for the earliest times available!)

Instructions:  
 Full Week Registrations: Fill in Either \$260: Reg. Camp -8:30 am-4:30 pm Price or \$285: Extended Day -7:30 am-5:30 pm Price.  
 Individual Day / Partial Week Registration: Fill in Daily Rate for Either Reg. Camp Price or Extended Day Price as listed.

**\*\*NO CAMP July 6th - July 10th\*\***  
 \*Please note, Wednesday is our BIG trip day. The added cost covers, additional staffing, large bus, admission costs and trip ending at 5pm!  
**\*\* Please Note that Week 1 Tuesday and Wednesday have different pricing than the other weeks, this is due to the Canobie Lake Park Trip\*\***

|                        | Full Week:<br>Reg. / Extend<br>\$260/ \$285 | O<br>R | Monday:<br>Reg. / Extend<br>\$55 / \$60 | Tuesday:<br>Reg. / Extend<br>\$55 / \$60 | *Wednesday:<br>Reg. / Extend<br>\$60 / \$65 | Thursday:<br>Reg. / Extend<br>\$55 / \$60 | Friday:<br>Reg. / Extend<br>\$55 / \$60 |
|------------------------|---|--------|---|--|---|---|---|
| Week 1:<br>6/29 – 7/3  |   |        |   | <b>\$60 / \$65</b>                       | <b>\$55 / \$60</b>                          |   |   |
| Week 2:<br>7/13 – 7/17 |   |        |   |  |   |   |   |
| Week 3:<br>7/20 – 7/24 |   |        |   |  |   |   |   |
| Week 4:<br>7/27 – 7/31 |   |        |   |  |   |   |   |
| Week 5:<br>8/3 – 8/7   |   |        |   |  |   |   |   |
| Week 6:<br>8/10 – 8/14 |   |        |   |  |   |   |   |
| <b>Totals:</b>         |   |        |   |  |   |   |   |

Sub-Total for Summer: \_\_\_\_\_ (Add All Totals Above for Sub-total)  
 Deposit Paid at Registration: - \_\_\_\_\_ **(25% 1<sup>st</sup> Payment Due at Registration)**  
 Remaining Summer Total: \_\_\_\_\_ (Pd. in 3 Additional- 25% Payments Due April 15th, May 15th & June 15th)

**All payments must be made in full before your child can attend camp. Refunds will only be given if we can fill your spot prior to May 1st. No Refund after May 1st. 25% Deposit is non refundable.**

\_\_\_\_\_  
 Parent / Guardian Signature Date

Please make checks payable to: **Town Of Epping** Epping Recreation Tax ID #: 02-603-5184  
 Mailing Address: 157 Main Street, Epping, NH 03042 Phone: (603)679-3006

## Epping Recreation Participant Information Form

|                          |                   |                    |
|--------------------------|-------------------|--------------------|
| Participant Name:        | Home Phone        | Male/ Female       |
| Address:                 | City, State Zip   |                    |
|                          | Grade as of 9/26: | Age:      DOB: / / |
| Parent/ Guardian Name 1: | Email:            |                    |
| Cell Phone:              | Work Phone:       |                    |
| Parent/ Guardian Name 2: | Email:            |                    |
| Cell Phone:              | Work Phone:       |                    |

Please print clearly in ink:

\*Name and phone # a person to be contacted in case of parent/ guardian is not available in event of an emergency.

|       |               |             |
|-------|---------------|-------------|
| Name: | Relationship: | Cell Phone: |
| Name: | Relationship: | Cell Phone: |

\*Authorized Escorts: Please list the names and phone numbers of individuals permitted to pick up your child.

|       |               |             |
|-------|---------------|-------------|
| Name: | Relationship: | Cell Phone: |
| Name: | Relationship: | Cell Phone: |
| Name: | Relationship: | Cell Phone: |

### Permission to Participate and Parental Acknowledgement

**I understand injuries to participants can occur during recreational activities.** I understand that this minor child will be dropped off at designated locations and will need to travel home on his or her own volition without the supervision of the Town of Epping Recreation Department, its representatives, or employees. As parent/guardian, we understand that appropriate arrangements must be made to pick up the child. I understand that **activities** and **transportation** have **inherent foreseeable** and **unforeseeable risks** and **dangers** associated with them. **Risks** and **dangers** may include, but are not limited to: motor vehicle travel, exposure to forces of nature, time of day, remoteness from medical facilities, insufficient cellular phone coverage, encounters with persons not associated with the Town of Epping Recreation Department or the minor child, physical and mental challenges. I acknowledge that this child's participation at the Epping Recreation Department is voluntary.

I have read this form and fully understand that by signing this form I acknowledge and accept such risks.

**By signing below, I acknowledge that I have read and understand the above statements.**

|                            |               |       |
|----------------------------|---------------|-------|
| Parent/Guardian Signature: | Printed Name: | Date: |
|----------------------------|---------------|-------|

|                            |               |       |
|----------------------------|---------------|-------|
| Parent/Guardian Signature: | Printed Name: | Date: |
|----------------------------|---------------|-------|

## Medical Information & Authorization for Medical Evaluation and Treatment

Medical Information Disclaimer: **\*\*It is mandatory that this form be completely filled out by the parent or legal guardian. Failure to provide complete and honest information could result in harmful situations to your child's health and well being.**

All information documented on the form will be kept confidential by Epping Recreation staff, and will only be shared with appropriate personnel in case of a medical emergency. Please fill out the form completely and honestly, which will aid in planning and participant assessment.

**Physical Conditions:** \_\_\_\_\_ NONE  
 Please explain any physical conditions, injuries, chronic illnesses (diabetes, asthma, epilepsy, etc.) or disabilities, which might limit your child's participation in any activities. Has your child been hospitalized for any of these conditions within the last year?

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**Allergies:** Food, insects, bees, medications, etc. Please list below: \_\_\_\_\_ NONE

| Allergies | Typical Reaction | Medications |
|-----------|------------------|-------------|
|           |                  |             |
|           |                  |             |

**Emotional Conditions:** \_\_\_\_\_ NONE  
 Please check any emotional or behavior conditions, which might limit your child's participation in any activities. Please provide further explanation in the space below if necessary.

Depression     ADD/ADHD     ODD     Autism/ Asperger's     Anxiety    \_\_\_\_\_  
 PTSD     Bipolar     Other

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**Medications:** \_\_\_\_\_ NONE Please list all current medications (prescription and over the counter) and the condition for which they are taken.

| Medications (include amt. and frequency) | Medical Condition | Personal Side Effects of the Meds |
|--|-------------------|-----------------------------------|
|  |                   |                                   |
|  |                   |                                   |

**Primary Physician:** Please provide NAME, ADDRESS, and PHONE NUMBER.

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**Health Insurance:** \_\_\_\_\_ NONE

| Insurance Company | Policy Number | Group Number |
|-------------------|---------------|--------------|
|                   |               |              |

I acknowledge that the medical information recorded above is true and accurate. I agree to advise Epping Recreation in writing of any change in the medical condition or medical regiment of this minor child. I understand that unless Epping Recreation is notified, Epping Recreation will assume that all medical information is unchanged until a new form has been received by the Epping Recreation Department. I acknowledge that I am the parent/ legal guardian of this minor child, and I hereby authorize Epping Recreation, its representatives, or employees to obtain necessary evaluation and treatment of this minor child. Notice is hereby given to any health care provider that Epping Recreation is fully authorized to obtain necessary medical evaluation and treatment.

By signing below, I acknowledge that I have read and understand the above statements.  
 Parent or Legal Guardian

**Signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### **Mandated Reporting and Duty to Warn**

That state of New Hampshire has reporting laws, which require all Epping Recreation employees to report any suspicion of abuse, neglect or exploitation of a child to the Department of Children, Youth and Families (DCYF). If an Epping Recreation employee believes that someone he/she is working with is in danger of harm to self, others, or property, they are obligated to communicate the threat to the victim or victims or to the department of such threat.

**By initializing below, I acknowledge that I have read and understand the above statements.**

**Parent/ Legal Guardian Initials:** \_\_\_\_\_

### **Photo/ Video Release**

During the course of activities, photographs and videos may be taken and used in the promotion of the Epping Recreation Department and its funding sources. These may appear in newspapers, on television, and on computer promotions for the Epping Recreation program. By initializing below I authorize the use of photos without any compensation.

**Please indicate your intent by initialing one of the two following choices:**

\_\_\_\_\_ **Yes**, this minor child's photographs and/ or video may be used by Epping Recreation for promotions.

\_\_\_\_\_ **No**, this minor child's photographs and/ or video may not be used by Epping Recreation for promotions.

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### **PG Movie Release**

From time to time movies are shown at Epping Recreation. By initialing below, you have agreed that your child has your permission to watch these movies and the Epping Recreation will not be held liable for their viewing.

**\*\*Please indicate by initialing one of the two following choices:**

\_\_\_\_\_ **Yes**, this minor child may view movies with a PG rating.

\_\_\_\_\_ **No**, this minor child may not view movies with a PG rating.

### **PG-13 Movie Release (only for youth ages 10 and older)**

From time to time movies are shown at Epping Recreation that may have the rating of PG-13. By initialing below, you have agreed that your child has your permission to watch these movies and the Epping Recreation will not be held liable for their viewing.

**\*\*Please indicate by initialing one of the two following choices:**

\_\_\_\_\_ **Yes**, this minor child may view movies with a PG-13 rating.

\_\_\_\_\_ **No**, this minor child may not view movies with a PG-13 rating.

## Demographics

Demographics Disclaimer: Gathering demographic data is essential in securing grant funding. All information recorded in this section will be kept confidential. The information will aid in securing program funding through grants, be used by Epping Recreation for statistical purposes, and program assessment and planning.

1. Please check below:

What is your child's ethnicity?

- Hispanic
- Non-Hispanic

What is your child's race?

- White or Caucasian
- Black or African American
- Asian
- Pacific Islander
- Other single race
- Two or more races
- N/A

2. What is the income level in your household? Please circle below:

|                       |                         |                         |                         |                         |                          |
|-----------------------|-------------------------|-------------------------|-------------------------|-------------------------|--------------------------|
| Less than<br>\$20,000 | \$21,000 to<br>\$30,000 | \$31,000 to<br>\$40,000 | \$41,000 to<br>\$50,000 | \$51,000 to<br>\$70,000 | Greater than<br>\$70,000 |
|-----------------------|-------------------------|-------------------------|-------------------------|-------------------------|--------------------------|

3. As the child's parent/ guardian, what is your highest level of education? Please circle below:

Parent/ Guardian #1:

|                     |   |              |                          |                          |                 |
|---------------------|---|--------------|--------------------------|--------------------------|-----------------|
| Some High<br>School | High School<br>Diploma or<br>Equivalent | Some College | 2 Year College<br>Degree | 4 Year College<br>Degree | Graduate Degree |
|---------------------|---|--------------|--------------------------|--------------------------|-----------------|

Parent/ Guardian #2:

|                        |   |              |                          |                          |                 |
|------------------------|---|--------------|--------------------------|--------------------------|-----------------|
| Some<br>High<br>School | High School<br>Diploma or<br>Equivalent | Some College | 2 Year College<br>Degree | 4 Year College<br>Degree | Graduate Degree |
|------------------------|---|--------------|--------------------------|--------------------------|-----------------|

4. What other summer activities does your child participate in?

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5. Does your child receive free or reduced lunch? Please circle:      FREE / REDUCED/ N/A

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6. How many people are living in your household?

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7. If a single parent heads your household, is it headed by a MALE OR FEMALE?

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# **2026 Summer Camp Program**

## **Parent Handbook**

### **River Otters Summer Camp**

**A 6 Week Camp for Children Entering  
1<sup>st</sup> Grade – 4th Grade**

### **Bobcats Summer Camp**

**A 6 Week Camp for Children Entering  
5th Grade - 8th Grade**

**Epping Parks & Recreation Department**

**157 Main St**

**Phone: 603-679-3006**

**[director@eppingrecnh.gov](mailto:director@eppingrecnh.gov)**

### **Mission Statement**

“It is our mission to provide a safe, comfortable, consistent environment which allows youth to have fun and reach their full potential, both socially and emotionally.”

To that end, we have established expectations and procedures for how we will play, learn and work together.

# Camp Descriptions

## River Otters Summer Camp:

(Program Cell: 608-9016)

Camp Hours: 8:30am-4:30pm

Extended Day Camp: 7:30am-5:30pm (Additional Cost)

Location: EES Gym & EES Classrooms

## River Otters Summer Camp:

Each day includes a variety of fun activities designed to build social skills, self confidence, creativity, and physical fitness. Campers are assigned to groups according to their age. Enrichment activities include, but are not limited to art, sports, music and science based activities. Each camper will go on 3 trips per week to various activities. You will be provided with a Trip Schedule prior to the start of camp with Trip Dates, Locations and Times. Weekly camp cost covers all activities, trips, admission costs, transportation and staff supervision.

## Bobcats Summer Camp:

(Program Cell: 608-9076)

Camp Hours: 8:30am-4:30pm

Extended Day Camp: 7:30am-5:30pm (Additional Cost)

Location: Watson Academy & EES Gym

## Bobcats Summer Camp:

We strive to provide a safe, fun environment filled with enrichment activities. All programming is open to youth entering 5th - 8th grade. Daily programming includes a jam-packed schedule of music, sports, arts & crafts, outdoor adventure, cooking, water games and much more. There are plenty of choices for everyone and plenty of field trips throughout the week to keep our participants active and entertained. The Bobcats have either a large trip, mini trip or show each day of camp. As always, camp cost covers all activities, trips, admission costs, transportation and staff supervision. You will be provided with a complete list of these trips, times and locations.

## **Participant Expectations**

Epping Recreation offers a SUMMER CAMP EXPERIENCE! This program is **not** intended as simple child care. ACTIVE PARTICIPATION during scheduled activities and trips is EXPECTED! If your child does not want to participate in this program, please reconsider signing them up! **No refunds** will be given to participants who do not show up on registered days. Please be sure your child understands these guidelines before attending our Recreation programs.

For the **Safety of All Participants**, we kindly request that children:

- Treat ALL staff and other children with respect, including when instructions are given
- Taunting, name calling, bullying, profanity or physical violence **will not be tolerated**.
- Respect others' boundaries and personal space.
- Play safely and dress appropriately for the program.
- Treat and use equipment properly and follow the rules for all activities.
- Stay in supervised areas at all times.
- Find a staff member they feel comfortable discussing concerns or questions with.
- Participate in scheduled programs or discuss with staff if there are concerns.

**Remember.... Coming to Summer Camp is your choice!**

## **Behavior Policy:**

Both River Otters and Bobcats Summer Camps strive to provide a safe and healthy environment for all participants and staff involved. We have a strict policy of zero tolerance for bullying and abusive behaviors. We utilize a behavior log, when necessary, to track individual participants behaviors that are found to be unsafe or inappropriate for the camp environment and its participants. Participants will be given clear expectations and guidance by staff to help them understand and follow the rules and behavioral expectations of the program. If a participant displays inappropriate behavior at a level that warrants action, the behavior or action will be recorded in the behavior log and shared with the parent or guardian, either at pick-up, or if necessary by phone at time of behavior. We will make every attempt to work with participants and parents on any behavioral issues that may arise, but our number one responsibility is to provide a safe environment for ALL participants and staff. In extreme cases, participants may be suspended or expelled from the program. There will be NO REFUNDS given as a result of this action. If your child has any health or mental deficits that may affect his/her ability to follow behavioral expectations, please make an appointment to speak with the Recreation Director or Assistant Director. We are unable to accommodate one on one care during our programs, but are willing to work with parents on plans or strategies, when possible, that may help the child be successful during their camp experience. Parents must be available to pick up their child, if necessary!

## **Playground Rules**

Participants are expected to follow the school's playground rules as expected during the school year. Staff are trained in the rules and safety concerns of the playground equipment and will provide supervision and direction to children at all times on the playground. We will be utilizing the playground at EES for all age groups

## Rules for Riding the Bus

1. The driver is in charge of the bus. Participants shall obey the driver promptly.
2. Participants shall occupy the seat designated for them by the driver/ supervising staff.
3. Feet shall be on the floor and out of the aisle.
4. Hands and arms shall be kept out of the aisle and inside the windows.
5. Participants are to remain seated until the bus reaches the designated area and comes to a complete stop. Children are to remain seated until directed by the driver or group leader.
6. Physical abuse and/or use of abusive language to others or the bus driver will not be tolerated.
7. Please refrain from loud talking, whistling or shouting. Remember—unnecessary noise is distracting to the driver, and his/her concern is your safety.

Riding the bus is a privilege. This privilege may be temporarily denied or permanently revoked if misconduct of your child jeopardizes the safe operations of the bus or the safety of the children riding the bus.

## Discharge Policy

The Epping Recreation Department reserves the right to cancel the enrollment of a child for the following reasons:

- Failure to pay. Your child will not be allowed to attend programs that have not been paid for in advance of the time attending!
- Not following policies outlined in this handbook
- The child has special needs which the program cannot meet. Please see Parks & Recreation Director to discuss in advance of registration. We will make every effort to accommodate special needs, whenever possible, including allowing a parent or caregiver to accompany a child with special needs, if appropriate. (Refund will be given in this case)
- Physical and/or verbal abuse of staff or children by parent or child –NO REFUNDS

## Expectations of Parents

**Parents or those on the pick up list need to bring their ID's with them.** The staff will check to make sure they are on the approved pick up list before releasing the child to you. If you have any concerns about people on the approved pick up list please contact the Camp Director or Assistant Director of the Recreation Department.

Please remember to send your child with everything he/she needs for the program.

- Water bottle (20oz.) or more –REQUIRED! Please label your child's bottles!
- Lunch & Snacks (at least two) (We do not have a refrigerator/microwave for lunches)
- Dress your children appropriately for activities/weather. Please send fair skinned children with hats and sleeves instead of tank tops to help with preventing sunburns!
- Necessary medication. (Please see Camp Director)
- Sunscreen and Bug Spray - Sunscreen is REQUIRED.. Please label your child's bottles! Spray Sunscreen is best, but our staff will assist young children with lotion type if necessary on legs, arms, face, ears and neck areas only!
- Sneakers – No open toe shoes or sandals! You may send sandals during beach days, but please include sneakers in their bag for any play times at parks and back at school/Watson.
- NO TOYS FROM HOME PLEASE.

Please let us know when someone not listed on your child's registration/ participation form will be picking up

your child. We will need this in writing. Please provide a letter at drop off or pick up and let the staff know.

### **Summer School:**

Please let us know if your child is attending summer school as soon as you know (At Reg. if possible) so that we can make arrangements to meet your child at the school when they are done or bring them to school if they have early drop off. Due to trip schedules, we need to make sure that children are assigned the earliest school/reading program slots available. We will be requesting that on some trip days, children are released from school at 10am. We will provide a list of trips and bus times to the school and parents once registered.

**Absences:** Please call the Camp Director Cell by 8:00 AM at 603-608-9016 or 603-608-9076 to let us know if your child is going to be absent from the program. It is important that we know if you have had a change of plans or if your child is sick and will not attend a registered day! We do not want to be holding buses for trips, waiting for children to arrive who are not planning to attend that day!

### **Drop Off & Pick Up:**

Drop and Pick up will be at the EMS Cafe. If looking at the High School front entrance camp, pick up and drop off will be at the far right door with the small set of stairs off of the Cafeteria. You can park in front of the building and wait for someone to come out to get your child. A sign will be posted if we are out of the building. If you have any questions at drop off or pick up, please call the Camp cell at 608-9016.

### **Early Drop-Off / Late Pick-Up Policy (Extended Day Camp Option):**

We offer extended hours, at an additional cost, before and after camp to accommodate parents' work schedules. This option is the "Extended Day Camp" option on the Registration Form, which covers you from **7:30am-5:30pm**. You must register in advance and pay for this service, so we can ensure that we have adequate staffing for the number of expected campers!

Early Drop-Off, **prior to 7:30 am IS NOT ALLOWED!!** There will be no staff present at the program to watch your child prior to 7:30 am!

Late Pick-UP, after **5:30pm** IS NOT ALLOWED!! There will be a \$5 late fee charged for every 5 minutes late beyond **5:30pm, due upon pick-up**. You will receive ONE warning day! If you have not paid for PM Extended care, pick-up time is at **4:30pm!** If you arrive after 4:40pm, you will be charged for the extended daily rate of \$5, **due upon pick-up**. If you repeatedly pick up beyond your pick-up time, you may be required to register for "Extended Day Camp" option for the remainder of the summer or if already registered for late pick up, your child may be removed from the program.

### **Sick Child Policy:**

- We cannot accommodate sick children at our program!
- We will send your child home if he or she is sick! This includes, but is not limited to: vomiting, diarrhea; fever over 100 degrees, lice and conjunctivitis (pink eye), strep throat or any other contagious illness.
- When your child is sick you must return the Recreation Departments' phone call promptly (within 30 min.) and make necessary arrangements for your child's pick-up.
- Any child who has been absent due to a contagious illness, must show no symptoms of illness for a 24 hour period, without the use of fever reducing medication, before returning to any program. (Please help us keep germs out of camp!!!)
- If your child has lice, your child is **not** able to attend any recreation programs. Your child can resume attendance when there is no evidence of lice and treatment is underway. (Dr. Note)

### **Medical Needs:**

- Each participant must have a medical form with a signed waiver on file 48 hours before the first day your child will attend or he/she will not be allowed to attend. If there are any medical changes that should be noted on the medical form during the course of your child's attendance at our program you must notify us immediately. This includes new medications.
- The Health portion of the Participation Form needs to be COMPLETELY filled out, including reactions and other important info. for staff to be aware of. **If your child has a particular health concern that may warrant extra attention or awareness from staff, please contact the Camp Director or Parks & Recreation Director, prior to the first day of camp to discuss! This will allow for additional staff education, as needed and the first day of camp is not a good time to discuss this, as it is often busy and there is lack of privacy and time to educate staff.**
- Members of the recreation staff are trained in CPR, First Aid, and Epi-Pen Injections, but are **not able to administer non-emergency injections.**
- The staff will make every attempt to communicate with parents in the event that a child is injured during the day, either with a phone call or at the end of the day at sign-out, depending on the severity.
- Participants needing medication during the program must have a parent authorization form on file, stating the exact time and dosage of the medication to be administered. Please see the Camp Director or Parks & Recreation Director prior to the first day of camp, if your child will be taking medication during the camp day. This will give us time to make sure we have a clear understanding of what is being taken, when and how, along with any other info. needed to keep your child safe and healthy during camp.

## **Divorced/Separated Parents & Guardians**

### **Policy:**

The Epping Parks & Recreation Department recognizes that many families have experienced divorce or separation. We feel that in order to best support and care for our participants it is important that we be able to maintain good relations with all significant adults in their lives, to include grandparents or other relatives caring for children or foster children.

If you need to discuss any matters of importance in relation to divorce/separation and any other issues that may help us in the care of your child, please make an appointment to meet **privately** with the Camp Director or Parks & Rec. Director, without your child present!

We need to have a clear understanding of the following:

- What the custody arrangements are
- Which parent to contact first for general questions and in an emergency
- Who is responsible for payments
- Who is or is not authorized to pick up your child (court paperwork may be required)
- Who are the significant adults in your child's life and their relationship to your child, especially if we are to have contact with them

In an effort to minimize situations that may be uncomfortable for you, your child, our staff or other participants, we ask that you refrain from talking about custody issues, visitation disputes, problems with, or negatively about your child's other parent in front of our participants, including your child. Please note that we

cannot deny a parent access to their child, solely based on the word of the other parent. We need to have the court order authorizing this request, if applicable.

If there are any altercations between parents, program participants will be moved away from the incident and police will be notified.

### **Payment Policy:**

We prefer payment by check. If paying with cash, you must give cash payments **directly to the Camp Directors, Assistant Director or ask for the staff in charge** and obtain a receipt at time of payment. Please make checks payable to "Town of Epping". **Check Payments** may be mailed, given directly to Camp staff or placed in the Recreation Mailbox at Board Of Selectmen's Office at Town Hall. Receipts are available upon request. Please do not drop off payments to the school office or school staff during the Summer! Tax ID # is 02-603-5184. Please retain all receipts and Tax ID # for your yearly taxes. Email Tiffany with any billing questions, Office@eppingreclnh.gov.

### **Payment Structure**

When you register your child for our summer program you must pay a minimum deposit of 25% of total balance, to be submitted **with a registration form**. **No registrations will be accepted without 25% minimum deposit payment!** Registrations are first come first served and space is limited. Registrations open on town voting day in March.

Our payment plan is as follows: Payment Plan: 25% due at registration, 25% due by April 15th, 25% Due May 15th and remaining 25% balance due by June. 15th. Attendance will be denied if not paid in full prior to the start of camp.

### **Refund Policy**

25% deposits are nonrefundable. Refunds will only be given if we can fill your space prior to May 1st. Refunds will not be given after May 1st.

### **Financial Assistance:**

At this time, we have established a small fund for assistance through the Rec. Dept. for summer programs. If you require financial assistance please let us know. Funds will be limited and awarded based on need and in the order received. Funds will not cover the entire cost of camp. You will be responsible for the remaining balance, due in advance of each week attending. Funds will have a maximum allowed amount per summer. If you receive funding this year, you will be moved to the bottom of next year's list, if there is more need than funding next year. If you have questions regarding the process for applying for financial assistance please call Nicole, Parks & Recreation Director at 603-679-3006.

**Please return this page to the**  
**Epping Parks & Recreation Department**  
**At Registration!**

**Acknowledgement of receiving and agreement to follow all policies in the Parent Handbook!**

I \_\_\_\_\_ have read, understand and agree  
*(Parent's Name)*

to follow and have reviewed with my child

\_\_\_\_\_ the summer camp handbook that includes:  
*(Child's Name)*

Participant Expectations, Behavior Policy, Parent Expectations, Drop-Off and Pick-Up Policy, Sick Child Policy, Payment Policy and Discharge Policy.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**Photo/ Video Release**

During the course of activities, photographs and videos may be taken and used in the promotion of the Epping Recreation Department and its funding sources. These may appear in newspapers, on television, and on computer promotions for the Epping Recreation program.

By initialing below I authorize the use of photos without any compensation.

Please indicate your intent by initialing one of the two following choices:

\_\_\_\_\_ **Yes**, this minor child's photographs and/ or video may be used by Epping Recreation for promotions.

\_\_\_\_\_ **No**, this minor child's photographs and/ or video may not be used by Epping Recreation for promotions.

**Swimming Skills**

**Name:** \_\_\_\_\_

Please fill out the following information so that we can be aware of your child's swimming abilities.

Please Check the Level that BEST Describes your child's swimming ability.

\_\_\_ Level 1: Uncomfortable in or around Water.

Non- swimmer with limited or no swim lesson experience.

\_\_\_ Level 2: My child likes the water, but does not have any swimming skills yet.

Knows basic water safety rules. (will be covered at camp as well)

Can submerge mouth, nose, and eyes.

Can exhale underwater (Blow Bubbles)

\_\_\_ Level 3: Comfortable in the water and has some swim skills.

Can swim on front using doggie Paddle, short distances

Can submerge entire head

Can float on back for short periods of time

\_\_\_ Level 4: Can swim on front and back, min. width of standard pool

Able to swim under the water

Able to swim in the deep end of a pool safely

Can tread water using arm and leg motions.

\*If your child does not have any swimming skills yet, they will not be allowed to enter water over their knees! Please Note: Water Park activities will be limited!

All children will be supervised at all times during water activities, regardless of swim level. We only utilize beaches for swim related activities that have lifeguards on duty and all Epping Rec. staff have completed water safety training.

Comments:

\_\_\_\_\_  
\_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_